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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		First Named Inventor	2001-0878_ORT WIGMORF, A. J.	
		COMPLETE IF KNOWN		
		Application Number		
☑ Declaration ☐ Declaration Submitted OR Submitted after Initial with Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date			
	Group Art Unit			
	Examiner Name			

As a bolow named inventor, I hereby declare that:					
My residence, post office address, and citizenship are as stated below next to my name.					
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the inventor emitled:					
TREATMENT OF ALLERGIC CONDITIONS					
the specification of which is attached hereto	(Tible	of the Invention)			
OFI was filed on (MM/DI		as United	i States Applicati	ion Number or P	CT International
Application Number		s amended on (MM/DD/Y)			(if applicable).
I hereby state that I have reviewed and understand the coments of the above identified specification, including the claims, as amended by any amendment specifically referred to above.  I admovinedge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, fisted below and have also identified below, by chocking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Fareign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	NO NO
PCT/GB99/03731	UNITED KINGDOM	11/09/1999	0000	0000	0000
PTOSEURS attached horato:					
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:  I hereby daim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.					
Application Number		e (MM/DD/YYYY)			
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[Page 1 of 2]

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## **DECLARATION** — Utility or Design Patent Application I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the patients of PCT international date of this parallel in the prior application of and the national or PCT international filing date of this application. Parent Patent Number Parent Filing Date U.S. Parent Application or PCT Parent (if applicable) (MM/DD/YYYY) Number 11/09/1999 PCT/GB99/03731 Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto As a named inventor, I hereby appoint the tollowing registered practitioner(s) to prosecute this application and to transact all business in the Paten Place Customer and Trademark Office connected therawith: Customer Number Number Bar Codo OR Label here Registered practitioner(s) name/registration number listed below Registration Registration Number Name Number Additional registered practitioner(s) named on supplemental Registered Practitioner Information shoot PTO/SB/02C attached hereto. Direct all correspondence to: Customer Number OR Correspondence address below or Bar Code Label Mark J. Burns, Esq. Name HAUGEN LAW FIRM PLLP Address 121 South Eighth Street, Suite 1130 Address 55402 W ZIP Minneapolis State City 612/339-8200 612/339-8300 Fax United States Telephone Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are beliefed to be true; and further that these statements were made with the knowledge that within false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unalgned inventor Name of Sole or First Inventor:

Family Name or Surname Given Name (first and middle [if any]) WIGMORE Alexander James 4-4-01 Inventor's navan Signature UK υK Country Residence: City CHURCH LANG Post Office Address LOCKINGTON Post Office Address UK D674 2TF Country DERRY ZIP City supplemental Additional Invertor(s) sheet(s) PTO/SB/02A stracted hereto Additional Inventors are being named on the

[Page 2 of 2]